



PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it display a valid OMB control number.

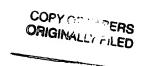
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Under the Paperwork Reduction Act of 1995, no persons are required to	respond to a collection of informatio	n unless it display a valid OMB control number.	
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	09/966,462	
	Filing Date	09/28/2001	
	First Named Inventor	David Leon	
	Group Art Unit	unknown	
	Examiner Name	unknown	
	Attorney Docket Number	NC17207FULL	

I hereby appo	pint:						
т петеру аррс							
	ners at Customer Number 26933						
OR Practitioner(s) named below:							
Practition	The state of the s	Registration Number					
-	Name	Registration Number					
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.							
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR							
Firm or							
Individual Na Address	ame						
Address							
City		State Zip					
Country							
Telephone		Fax					
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
***	SIGNATURE of Applicant or Assign	gnee of Record					
Nama	Khiem Le						
Name	K/1. 1.	71.					
Signature	Jan 8, 2002	T 12 2000 1					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple							
forms if more than one signature is required, see below*.							
i lotal of	ioms are submitted.						

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





Please type a plus sign (+) inside this box —

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

·		_
Application Number	09/966,462	
Filing Date	09/28/2001	
First Named Inventor	David Leon	
Group Art Unit	unknown	
Examiner Name	unknown	
Attorney Docket Number	NC17207FULL	_

M and the state of								
I hereby app	oint:			1110111	STEER OF THE ROLL OF THE STATE			
Practition OR	oners at Customer Number 26933	3]_	Lat	26022			
	ner(s) named below:				IT TRADEMARK OFFICE			
	Name		Registration Number					
L								
as my/our atto	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all							
business in the United States Patent and Trademark Office connected therewith.								
Please change	the correspondence address for the above-	-identif	ed a	pplication to:				
The above	-mentioned Customer Number.							
OR .								
Firm or Individual N	ama							
Address	anie							
Address								
City		Sta	te		Zip			
Country				•				
Telephone		Fa	(
I am the:								
Applicar	nt/Inventor.							
☐ Assigne	e of record of the entire interest. See 37 C	FR 3.7	1.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
SIGNATURE of Applicant or Assignee of Record								
Name	David Leon				-			
Signature	Cili.							
Date	12 y 2002							
NOTE: Signatures of all the inventors of assignees of record of the entire interest or their representative(s) are required. Submit multiple								
forms if more than one	signature is required, see below*. forms are submitted.							
10ta101	ioillis ale sublimited.							

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.